

01 FEB 2006

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/541788

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/					
2		1				
3		2				
4		3				
5		4				
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20		19				
21			1	1		
22				1		
23				1		
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25				1		
26				1		
27				1		
28				1		
29				1		
30				1		
31				1		
32				1		
33				2		
34				2		
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49						
50						
TOTAL IND.	1		1			
TOTAL DEP.	20		22			
TOTAL CLAIMS	21		23			

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						